

UNITED STATES BANKRUPTCY COURT
DISTRICT OF

In re Nicholas V. Campanella
Debtor

Case No. 16-21185-VFP
Reporting Period: November, 2016

Social Security # xxx-xx-1243
(last 4 digits only)

MONTHLY OPERATING REPORT
(INDIVIDUAL WAGE EARNERS)

File with the Court and submit a copy to the United States Trustee within 20 days after the end of the month and submit a copy of the report to any official committee appointed in the case.
(Reports for Rochester and Buffalo Divisions of Western District of New York are due 15 days after the end of the month, as are the reports for Southern District of New York.)

REQUIRED DOCUMENTS	Form No.	Document Attached	Explanation Attached
Schedule of Cash Receipts and Disbursements	MOR-1 (INDV)	Yes	No
Bank Reconciliation (or copies of debtor's bank reconciliations)	MOR-1 (CONT)	Yes	Yes
Copies of bank statements		Yes	Yes
Disbursement Journal	MOR-2 (INDV)	Yes	No
Balance Sheet	MOR-3 (INDV)	No	No
Copies of tax returns filed during reporting period		No	No
Summary of Unpaid Post-petition Debts	MOR-4 (INDV)	Yes	No
Status of Secured Notes, Leases, Installment Payments	MOR-5 (INDV)	No	No
Debtor Questionnaire	MOR-6 (INDV)	Yes	No

I declare under penalty of perjury (28 U.S.C. Section 1746) that the documents attached to this report are true and correct to the best of my knowledge and belief.

Signature of Debtor

Nicholas V. Campanella

Date

6/19/17

Signature of Joint Debtor

Date

In re Nicholas V. Campanella

Debtor

Case No. 16-21185-VFP

Reporting Period: **xxx-xx-1243**

INDIVIDUAL DEBTOR CASH RECEIPTS AND CASH DISBURSEMENTS

(This Form must be submitted for each bank account maintained by the Debtor)

Amounts reported should be per the debtor's books, not the bank statement. The beginning cash should be the ending cash from the prior month or, if this is the first report, the amount should be the balance on the date the petition was filed. Attach the bank statements and a detailed list of all disbursements made during the report period that includes the date, the check number, the payee, the transaction description, and the amount. A bank reconciliation must be attached for each account. [See MOR-1 (CONT)]

	Current Month Actual	Cumulative to Date Actual
Cash - Beginning of Month	\$ 157,545.49	
RECEIPTS		
Wages (Net)	\$ 11,531.72	\$60,293.46
Interest and Dividend Income	5.34	\$25.88
Alimony and Child Support		
Social Security and Pension Income		
Sale of Assets		
Other Income (<i>attach schedule</i>)	\$28,580.92	\$255,314.63
Total Receipts	\$ 40,117.98	\$315,633.97
DISBURSEMENTS		
ORDINARY ITEMS		
Mortgage Payment(s)	\$7,437.69	\$37,188.45
Rental Payment(s)	\$200.00	\$1,000.00
Other Secured Note Payments	\$608.43	\$3,627.04
Utilities	\$1,138.49	\$5,238.57
Insurance		
Auto Expense		\$48.00
Lease Payments		
IRA Contributions		
Repairs and Maintenance		\$146.53
Medical Expenses		\$104.80
Food, Clothing, Hygiene	\$1,565.23	\$7,681.11
Charitable Contributions		\$15.00
Alimony and Child Support Payments		
Taxes - Real Estate		\$7,876.87
Taxes - Personal Property		
Taxes - Other (<i>attach schedule</i>)		\$80,000.00
Travel and Entertainment	\$966.82	\$3,295.81
Gifts	\$300.00	\$12,310.00
Other (<i>attach schedule</i>)	\$33,092.86	\$75,715.46
Total Ordinary Disbursements	\$45,309.52	\$234,247.64
REORGANIZATION ITEMS		
Professional Fees		
U. S. Trustee Fees		
Other Reorganization Expenses (<i>attach schedule</i>)		
Total Reorganization Items		
Total Disbursements (Ordinary + Reorganization)	\$ 45,309.52	\$234,247.64
Net Cash Flow (Total Receipts - Total Disbursements)	(5,191.54)	\$81,386.33

In re Nicholas V. Campanella

Case No. 16-21185-VFP

Debtor	Reporting Period: xxx-xx-1243
Cash - End of Month (Must equal reconciled bank statement)	\$ 152,353.95

INDIVIDUAL DEBTOR CASH RECEIPTS AND CASH DISBURSEMENTS
(continuation sheet)

BREAKDOWN OF "OTHER" CATEGORY	Current Month Actual	Cumulative Filing to Date Actual
Other Income		
Legal order reversal		\$274.28
Legal order reversal		\$125.00
Bank transfer to close previous account		\$350.00
Medical Insurance Refund		\$153.77
Credit Card Activitiy	\$179.09	\$2,858.78
Rent belonging to MCN Properties - deposited by mistake		\$39,781.09
Phoenix Medical Director Fees for Dr. Campanella	\$1,900.43	\$46,556.17
Distribution from Montclair Physicians Group, LLC		\$97,050.00
Distribution from Affiliates	\$26,501.40	\$68,165.54
Other Taxes		
Other Ordinary Disbursements		
Gina Campanella - reimbursement of expenses		\$150.00
Gina Campanella - reimbursement of expenses		\$320.00
Credit Cards Payable		\$1,465.65
Repairs & Maintenance	\$11.84	\$365.27
Family Contribution to Gina from Marie		\$40,000.00
Charitable Contributions	\$250.00	\$250.00
Capital Contribution to MCN Properties	\$30,000.00	\$30,000.00
Family Contribution to Joseph from Marie	\$2,831.02	\$2,831.02
Other Reorganization Expenses		

THE FOLLOWING SECTION MUST BE COMPLETED

DISBURSEMENTS FOR CALCULATING U.S. TRUSTEE QUARTERLY FEES: (FROM CURRENT MONTH ACTUAL COLUMN)

TOTAL DISBURSEMENTS	\$45,129.83
LESS: TRANSFERS TO OTHER DEBTOR IN POSSESSION ACCOUNTS	
PLUS: ESTATE DISBURSEMENTS MADE BY OUTSIDE SOURCES (i.e. from escrow accounts)	
TOTAL DISBURSEMENTS FOR CALCULATING U.S. TRUSTEE QUARTERLY FEES	\$45,129.83

In re Nicholas V. Campanella
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Reporting Period: **xxx-xx-1243**

DISBURSEMENT JOURNAL

CASH DISBURSEMENTS

Date	Payee	Purpose	Amount
10/27/16	PSE&G	Utilities	\$ 235.06
10/28/16	Ridgewood Water Dept	Utilities	\$ 466.43
10/28/16	Verizon	Utilities	\$ 234.04
10/28/16	Joseph Alfano	Rent	\$ 200.00
11/01/16	Joseph Alfano	Family Contribution	\$ 2,831.02
11/11/16	Cristian Hyde	Personal Gifts	\$ 300.00
11/16/16	Hassan	Travel & Entertainm	\$ 64.80
11/17/16	Verizon	Utilities	\$ 202.96
11/18/16	Chase Card Services	Chase	\$ 300.00
Total Cash Disbursements			\$ 4,834.31

BANK ACCOUNT DISBURSEMENTS

Date	Payee	Purpose	Amount	Check #
10/26/16	MCN Properties	Capital Contribution	\$ 30,000.00	625
10/27/16	BOA Line of Credit	LOC Interest	\$ 608.43	629
10/27/16	Wyckoff Protection Fire Co #1	Charitable Contribut	\$ 50.00	626
10/28/16	St. Hubert's Animal	Charitable Contribut	\$ 50.00	627
10/29/16	Friends of the Wyckoff Library	Charitable Contribut	\$ 100.00	631
10/29/16	Manasquan First Aid	Charitable Contribut	\$ 50.00	628
11/17/16	M&T Bank	Mortgage	\$ 7,437.69	634
Total Bank Account Disbursements			\$ 38,296.12	

Total Disbursements for the Month	\$ 43,130.43
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Nicholas V. Campanella
Debtor

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STATUS OF POSTPETITION TAXES

The beginning tax liability should be the ending liability from the prior month or, if this is the first report, the amount should be zero.
Attach photocopies of IRS Form 6123 or payment receipt to verify payment or deposit of federal payroll taxes.
Attach photocopies of any tax returns filed during the reporting period.

	Beginning Tax Liability	Amount Withheld or Accrued	Amount Paid	Date Paid	Check No. or EFT	Ending Tax Liability
Federal						
Withholding	\$0.00	\$4,942.11	\$4,942.11			\$0.00
FICA-Employee	\$0.00	\$348.00	\$348.00			\$0.00
FICA-Employer	\$0.00	\$0.00	\$0.00			\$0.00
Unemployment	\$0.00	\$0.00	\$0.00			\$0.00
Income	\$0.00	\$0.00	\$0.00			\$0.00
Other:						
Total Federal Taxes	\$0.00	\$5,290.11	\$5,290.11			\$0.00
State and Local						
Withholding	\$0.00	\$1,412.31	\$1,412.31			\$0.00
Sales	\$0.00	\$0.00	\$0.00			\$0.00
Excise	\$0.00	\$0.00	\$0.00			\$0.00
Unemployment	\$0.00	\$0.00	\$0.00			\$0.00
Real Property	\$0.00	\$0.00	\$0.00			\$0.00
Personal Property	\$0.00	\$0.00	\$0.00			\$0.00
Other:						
Total State and Local		\$1,412.31	\$1,412.31			
Total Taxes	\$0.00	\$6,702.42	\$6,702.42			\$0.00

SUMMARY OF UNPAID POSTPETITION DEBTS

Attach aged listing of accounts payable.

	Number of Days Past Due					Total
	Current	0-30	31-60	61-90	Over 90	
Accounts Payable	0					0
Wages Payable	0					0
Taxes Payable	0					0
Rent/Leases-Building	0					0
Rent/Leases-Equipment	0					0
Secured Debt/Adequate Protection Payments	0					\$0.00
Professional Fees	0					0
Amounts Due to Insiders*	0					0
Other: Condo Fees						
Other: Mortgage						
Total Postpetition Debts	0					\$0.00

Explain how and when the Debtor intends to pay any past-due postpetition debts.

*"Insider" is defined in 11 U.S.C. Section 101(31).

In re Nicholas V. Campanella

Debtor

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Reporting Period: November, 2016

DEBTOR QUESTIONNAIRE

Must be completed each month. If the answer to any of the questions is "Yes", provide a detailed explanation of each item. Attach additional sheets if necessary.		Yes	No
1	Have any funds been disbursed from any account other than a debtor in possession account this reporting period?		X
2	Is the Debtor delinquent in the timely filing of any post-petition tax returns?		X
3	Are property insurance, automobile insurance, or other necessary insurance coverages expired or cancelled, or has the debtor received notice of expiration or cancellation of such policies?		X
4	Is the Debtor delinquent in paying any insurance premium payment?		X
5	Have any payments been made on pre-petition liabilities this reporting period?		X
6	Are any post petition State or Federal income taxes past due?		X
7	Are any post petition real estate taxes past due?		X
8	Are any other post petition taxes past due?		X
9	Have any pre-petition taxes been paid during this reporting period?		X
10	Are any amounts owed to post petition creditors delinquent?		X
11	Have any post petition loans been received by the Debtor from any party?		X
12	Is the Debtor delinquent in paying any U.S. Trustee fees?		X
13	Is the Debtor delinquent with any court ordered payments to attorneys or other professionals?		X



P.O. Box 15284
Wilmington, DE 19850

NICHOLAS CAMPANELLA
MARIE T CAMPANELLA
384 SUNSET BLVD
WYCKOFF, NJ 07481-2420

Customer service information

- Customer service: 1.800.432.1000
- TDD/TTY users only: 1.800.288.4408
- En Español: 1.800.688.6086
- bankofamerica.com
- Bank of America, N.A.
P.O. Box 25118
Tampa, FL 33622-5118

Your combined statement

for October 26, 2016 to November 23, 2016

Your deposit accounts	Account/plan number	Ending balance	Details on
Adv Tiered Interest Chkg	0038 1686 0198	\$0.00	Page 3
BofA Core Checking	0040 9021 1159	\$23,201.79	Page 5
Rewards Money Market Sav	0040 9020 5922	\$129,152.16	Page 7
Total balance		\$152,353.95	

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Are Not FDIC Insured

Are Not Bank Guaranteed

May Lose Value

SSM-08-16-0058.B | ARVHXM9



Your checking account

Account number 10198

Your Adv Tiered Interest Chkg

NICHOLAS CAMPANELLA MARIE T CAMPANELLA

Account summary

Beginning balance on October 26, 2016	\$0.00
Deposits and other additions	0.00
Withdrawals and other subtractions	-0.00
Checks	-0.00
Service fees	-0.00
Ending balance on November 23, 2016	\$0.00
Interest Paid Year To Date: \$0.43.	

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friends to do the same.



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we'll give
\$2 more.*

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Your checking account

Account number 1 1159

Your BofA Core Checking Preferred Rewards Platinum Honors

MARIE T CAMPANELLA

Account summary

Beginning balance on October 26, 2016	\$58,398.67
Deposits and other additions	37,933.55
Withdrawals and other subtractions	-34,534.31
Checks	-38,596.12
Service fees	-0.00
Ending balance on November 23, 2016	\$23,201.79

Your account has overdraft protection provided by deposit account number 0040 9020 5922.

Deposits and other additions

Date	Description	Amount
11/02/16	PILGRIM MEDICAL DES:DIRECT DEP ID:925601218238GH8 INDN:CAMPANELLA,MARIE CO ID:9111111101 PPD	5,765.86
11/02/16	PHOENIX HEALTH M DES:QUICKBOOKS ID:XXXXXXXXX INDN:CAMPANELLA, M.D., NICH CO ID:1722616653 PPD	950.21
11/03/16	BKOFAMERICA MOBILE 11/03 3492593726 DEPOSIT *MOBILE NJ	1,925.00
11/14/16	BKOFAMERICA MOBILE 11/14 3495953137 DEPOSIT *MOBILE NJ	15,507.02
11/14/16	BKOFAMERICA MOBILE 11/14 3495963044 DEPOSIT *MOBILE NJ	5,000.00
11/14/16	BKOFAMERICA MOBILE 11/14 3495952614 DEPOSIT *MOBILE NJ	10.87
11/15/16	BKOFAMERICA MOBILE 11/16 3496395046 DEPOSIT *MOBILE NJ	1,575.00
11/16/16	PILGRIM MEDICAL DES:DIRECT DEP ID:940501448437GH8 INDN:CAMPANELLA,MARIE CO ID:9111111101 PPD	5,765.86
11/16/16	PHOENIX HEALTH M DES:QUICKBOOKS ID:XXXXXXXXX INDN:CAMPANELLA, M.D., NICH CO ID:1722616653 PPD	950.22
11/22/16	BKOFAMERICA MOBILE 11/22 3498271385 DEPOSIT *MOBILE NJ	483.51
Total deposits and other additions		\$37,933.55



Your savings account

Account number: 5922

Your Rewards Money Market Sav Preferred Rewards Platinum Honors

MARIE T CAMPANELLA

Account summary

Beginning balance on October 26, 2016	\$99,146.82
Deposits and other additions	30,005.34
Withdrawals and other subtractions	-0.00
Service fees	-0.00
Ending balance on November 23, 2016	\$129,152.16

Annual Percentage Yield Earned this statement period: 0.06%.
Interest Paid Year To Date: \$39.07.

Deposits and other additions

Date	Description	Amount
11/04/16	Online Banking transfer from CHK 1159 Confirmation# 2525604649	10,000.00
11/15/16	Online Banking transfer from CHK 1159 Confirmation# 3323116727	20,000.00
11/23/16	Interest Earned	5.34
Total deposits and other additions		\$30,005.34

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Nicholas V. Campanella or Marie Campanella

06/15/17

Profit & Loss

Accrual Basis

October 26 through November 23, 2016

	Oct 26 - Nov 23, 16
Ordinary Income/Expense	
Income	
Interest Income	5.34
Other Income	26,501.40
Phoenix Medical Director - Fees	1,900.43
Salary - Pilgrim Medical Center	11,531.72
Total Income	39,938.89
Gross Profit	39,938.89
Expense	
Charitable Contributions	250.00
Food, Clothing, Hygiene	
Clothing	278.99
Food	880.24
Hygiene	406.00
Total Food, Clothing, Hygiene	1,565.23
Interest Expense	
LOC	608.43
Total Interest Expense	608.43
Meals and Entertainment	966.82
Mortgage - M&T Bank	7,437.69
Personal Gifts	300.00
Rent Expense	200.00
Repairs and Maintenance	11.84
Utilities	1,138.49
Total Expense	12,478.50
Net Ordinary Income	27,460.39
Net Income	27,460.39

Payroll Details

Hours and Earnings		Deductions		Taxes		Employer's	
Pay Frequency	Biweekly	Amount	Amount	Amount	Amount	Liability	Amount
Department: 800 - Staff							
Employee: Campanella, Marie							
Regular	0.00	24,000.00		4,942.11		17,297.58	348.00
	0.00	24,000.00		348.00			348.00
				1,412.31			
				6,702.42			
Check Date: 11/02/2016 / Direct Deposit / Checking / Account No: XXXXXXXXXX1159				\$5,765.86			
Check Date: 11/16/2016 / Direct Deposit / Checking / Account No: XXXXXXXXXX1159				\$5,765.86			
Check Date: 11/30/2016 / Direct Deposit / Checking / Account No: XXXXXXXXXX1159				\$5,765.86			
Department Totals: 800 - Staff							
Regular	0.00	\$24,000.00		\$4,942.11		\$17,297.58	\$348.00
	0.00	\$24,000.00		\$348.00			\$348.00
				\$1,412.31			
				\$6,702.42			
Total Employees: 800 - Staff: 1							
Pay Frequency Totals: Biweekly							
Regular	0.00	\$24,000.00		\$4,942.11		\$17,297.58	\$348.00
	0.00	\$24,000.00		\$348.00			\$348.00
				\$1,412.31			
				\$6,702.42			
Total Employees: Biweekly: 1							
Company Totals							
Regular	0.00	\$24,000.00		\$4,942.11		\$17,297.58	\$348.00
	0.00	\$24,000.00		\$348.00			\$348.00
				\$1,412.31			
				\$6,702.42			
Total Employees: Company: 1							